



03-26-06

IFW 1764\$

PTO/SB/21 (09-04)

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**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

27 pages +  
6 references

Application Number

09/553,990

Filing Date

April 20, 2000

First Named Inventor

Youhao XU

Art Unit

1764

Examiner Name

J. Leung

Attorney Docket Number

456962000200

**ENCLOSURES (Check all that apply)**☒ Fee Transmittal Form (original +  
copy for fee processing (2 pages))☐ Fee Attached☒ Amendment/Reply (19 pages)☐ After Final☐ Affidavits/declaration(s)☒ Extension of Time Request (1 page)☐ Express Abandonment Request☒ Information Disclosure Statement  
(Supplemental) ( 3 pages)☐ Certified Copy of Priority  
Document(s)☐ Reply to Missing Parts/  
Incomplete Application☐ Reply to Missing Parts under  
37 CFR 1.52 or 1.53☐ Drawing(s)☐ Licensing-related Papers☐ Petition☐ Petition to Convert to a  
Provisional Application☐ Power of Attorney, Revocation  
Change of Correspondence Address☐ Terminal Disclaimer☐ Request for Refund☐ CD, Number of CD(s) \_\_\_\_\_☐ Landscape Table on CD☐ After Allowance Communication  
to TC☐ Appeal Communication to Board of  
Appeals and Interferences☐ Appeal Communication to TC  
(Appeal Notice, Brief, Reply Brief)☐ Proprietary Information☐ Status Letter☒ Other Enclosure(s) (please  
Identify below):• Form PTO/SB/08a/b (original +  
copy (2 pages))

• 6 References

• Return Receipt Postcard

Remarks

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm Name

MORRISON &amp; FOERSTER LLP (Customer No.: 25226)

Signature

Printed name

Jill A. Jacobson

Date

June 23, 2006

Reg. No.

40,030

Client Ref. No.: FPCH00160004US

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV534440813US, in an envelope addressed to: MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: June 23, 2006

Signature: \_\_\_\_\_ (Megha Aggarwal)



<b>FEE TRANSMITTAL</b> For FY 2006		<b>Complete if Known</b>	
		Application Number	09/553,990
		Filing Date	April 20, 2000
		First Named Inventor	Youhao XU
		Examiner Name	J. Leung
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Art Unit	1764
<b>TOTAL AMOUNT OF PAYMENT</b>		(\$)	630.00
		Attorney Docket No.	456962000200

<b>METHOD OF PAYMENT</b> (check all that apply)	
<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card
<input type="checkbox"/> Money Order	<input type="checkbox"/> None
<input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account	Deposit Account Number: <u>03-1952</u> Deposit Account Name: <u>Morrison &amp; Foerster LLP</u>
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

**FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)**

1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	0.00
Design	200	100	100	50	130	65	0.00
Plant	200	100	300	150	160	80	0.00
Reissue	300	150	500	250	600	300	0.00
Provisional	200	100	0	0	0	0	0.00

2. EXCESS CLAIM FEES			Small Entity
Fee Description	Fee (\$)		Fee (\$)
Each claim over 20 (including Reissues)	50		25
Each independent claim over 3 (including Reissues)	200		100
Multiple dependent claims	360		180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims
42	- 48 = 0	x 50.00 =	0.00	
HP = highest number of total claims paid for, if greater than 20.				
				Fee (\$)
				360.00

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
3	- 3 = 0	x 200.00 =	0.00
HP = highest number of independent claims paid for, if greater than 3.			

3. APPLICATION SIZE FEE				
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).				
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
	- 100 =	/50	(round up to a whole number) x 250.00 =	0.00

4. OTHER FEE(S)		Fees Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)		
Other (e.g., late filing surcharge): 1252 Extension for response within second month		450.00
1806 Submission of an Information Disclosure Statement		180.00

<b>SUBMITTED BY</b>			
Signature	<i>Jill A. Jacobson</i>	Registration No. (Attorney/Agent)	40,030
Name (Print/Type)	Jill A. Jacobson	Telephone	(650) 813-5876
		Date	June 23, 2006

Client Ref. No.: FPCH00160004US